

Outcomes of Nurse Residency Programs: A Literature Review

Dakota Clayton

Lakeview College of Nursing

N434: Evidence-Based Practice

Professor Eleni Key

July 15, 2023

Outcomes of Nurse Residency Programs: A Literature Review

According to Miller et al. (2023), a nurse residency program is a curriculum for new graduate nurses that includes traditional education and specialty-specific training to assist new nurses in transitioning into independent nursing practice. Munday (2023) explains that nurse residency programs offer various benefits to nurse residents, including enhanced clinical judgment, improved communication skills, increased job satisfaction, and reduced errors. Additionally, nurse residency programs are relatively new – in 2010, the Institute of Medicine included widespread nurse residency program implementation in their recommendations for changing and advancing health (Asber, 2019). Nurse residency programs play a new, vital role for new graduate nurses transitioning into practice.

Houser (2023) explains that the literature review is an essential part of the research process and provides an overview of current information regarding a specific topic and identifies gaps in knowledge. As nurse residency programs continue increasing in popularity among new graduate nurses and as more health systems implement nurse residency programs, it is crucial to analyze these programs and allow for continuous quality improvement. This literature review aims to review the results of three nurse residency programs and compare study conclusions to expected outcomes.

Transition Into Practice: Outcomes of a Nurse Residency Program

The first article of this literature review is by Miller et al. (2023) and is in the peer-reviewed *Journal of Continuing Education in Nursing*. In the study, Miller et al. (2023) examined the three-year outcomes of a nurse residency program among one hundred and six new graduate nurses. The study utilized an intervention group of nurses in the nurse residency program and a control group of nurses completing a traditional nurse orientation (Miller et al., 2023). According

to Miller et al. (2023), the study analyzed statistics, including retention rates, job satisfaction, and the Casey-Fink Readiness for Practice Survey. The study results indicated that the nurse residency program improved retention, job satisfaction, and readiness for nursing practice (Miller et al., 2023). This article provides evidence for the efficacy of nurse residency programs.

Key Points

The article by Miller et al. (2023) included various key points. The overall purpose of the study was to examine the impact of a nurse residency program on retention, job satisfaction, and readiness for nursing practice (Miller et al., 2023). Miller et al. (2023) described the research method as quasi-experimental. According to Houser (2023), quasi-experimental studies examine cause and effect but use convenience sampling or pre-existing groups instead of random assignment. According to Miller et al. (2023), the study population consisted of one hundred and six new graduate nurses hired between July 2016 and February 2018. Over the analysis period, the intervention group consisted of seventy-seven new graduate nurses participating in the nurse residency program and twenty-nine new graduate nurses participating in the traditional nurse orientation (Miller et al., 2023).

According to Miller et al. (2023), the data collection tools used included the Casey-Fink Readiness for Practice Survey, the Casey-Fink Nurse Retention Survey, a nurse job satisfaction survey, and nurse turnover and retention statistics. Miller et al. (2023) explain that the three survey tools used numerical scales to determine readiness for nursing practice, retention, and job satisfaction. Completion of surveys and statistics happened at regular intervals depending on the survey. According to Miller et al. (2023), the Casey-Fink Readiness for Practice Survey was completed at baseline, six weeks, three months, and twelve months. The Casey-Fink Nurse Retention Survey collection occurred at six months and twelve months, and the nurse job

satisfaction survey was completed at three months, six months, and twelve months (Miller et al., 2023). After collection, the research group calculated mean scores for each survey, and study group differences were determined using the Pearson X2 test (Miller et al., 2023). Miller et al. (2023) also calculated *p-values* for the research data and determined *p-values* less than 0.05 as significant.

Analysis of the survey results indicated significant differences between the intervention and control groups (Miller et al., 2023). The Casey-Fink Readiness for Practice Survey analysis yielded a *p-value* of less than 0.0001 for nurse residents, indicating significantly improved readiness for practice. According to Miller et al. (2023), the Casey-Fink Nurse Retention Survey yielded a *p-value* of 0.044, indicating a significantly increased likelihood for nurse residents to stay at their current job. The nurse job satisfaction survey yielded a twelve-month *p-value* of 0.028, indicating significantly higher job satisfaction among nurse residents (Miller et al., 2023). According to Miller et al. (2023), two-year retention rates for nurse residents were 68.18% for the 2016 cohort, 84.31% for the 2017 cohort, and 86.76% for the 2018 cohort. These results indicate significant improvements in readiness for practice, retention perceptions, and job satisfaction among nurse residents (Miller et al., 2023).

Assumptions

After analyzing the study results, Miller et al. (2023) provide multiple assumptions. The largest and most significant assumption is that the nurse residency program provides significantly better outcomes for new graduate nurses than traditional nurse orientation (Miller et al., 2023). The statistically significant results of the survey data collected in the study support this assumption. Another assumption made by Miller et al. (2023) is that when given the option of a nurse residency program, new graduate nurses are more inclined to complete residency than

a standard orientation program. The size of the intervention and control groups, which included seventy-seven new graduate nurses who chose to participate in the nurse residency and twenty-nine new graduate nurses who elected the traditional nurse orientation, supports this assumption (Miller et al., 2023).

Deficit/Conclusion

The study results of Miller et al. (2023) support the conclusion that nurse residency programs provide improved outcomes for new graduate nurses. Miller et al. (2023) are transparent in their study criteria, methods, analysis, and results and provide clear rationales for study results. The article's implications by Miller et al. (2023) significantly impact the nursing field by providing a basis for more healthcare organizations and facilities to implement nurse residency programs for new graduate nurses. Implications for not accepting the efficacy of nurse residency programs would include decreased readiness for nursing practice, job satisfaction, and retention rates for new graduate nurses and the institutions that employ them. Healthcare organizations must understand the importance of nurse residency programs and make strides toward implementing residency programs in their facilities.

First Year Outcomes: Program Evaluation of a Statewide Nurse Residency Program

The second article of this literature review is by Cadmus and Roberts (2022) and featured in the peer-reviewed *Journal of Nursing Administration*. The article examines the implementation and outcomes of a standardized, statewide nurse residency program in New Jersey (Cadmus & Roberts, 2022). According to Cadmus and Roberts (2022), the study focused on examining the outcomes of the New Jersey Collaborating Center for Nursing (NJCCN) nurse residency program compared to the national benchmarks set by the Vizient/American Association of Colleges of Nursing (AACN) nurse residency program. The study included

fifteen facilities and seven hundred and fifty-six new graduate nurse residents examined between August 2020 and December 2021 and utilized the Casey-Fink Graduate Nurse Experience Survey (Cadmus & Roberts, 2022). According to Cadmus and Roberts (2022), the study results indicated significant differences in various subscales of the Casey-Fink Graduate Nurse Experience Survey at the time of program initiation and the six-month period. The results of the study by Cadmus and Roberts (2022) advocate using nurse residency programs to improve nurse retention and provide evidence for increasing the length of these programs.

Key Points

Cadmus and Roberts (2022) discussed several critical points in the article. The study examined the outcomes of New Jersey's standardized nurse residency program compared to national benchmarks set by Vizient/AACN (Cadmus & Roberts, 2022). Cadmus and Roberts (2022) described the research method as a descriptive, cross-sectional study. The study population consisted of seven hundred and fifty-six newly licensed registered nurses from fifteen hospitals examined from August 2020 to December 2021 (Cadmus & Roberts, 2022). Cadmus and Roberts (2022) explain that data was collected at the beginning of the program, six months into the program, and twelve months into the program. The study used the Casey-Fink Graduate Nurse Experience Survey as its primary means of data collection (Cadmus & Roberts, 2022).

According to Cadmus and Roberts (2022), the Casey-Fink Graduate Nurse Experience Survey included twenty-four questions answered using a numerical scale from one to four, where one indicated "strongly disagree" and four indicated "strongly agree." Cadmus and Roberts (2022) identified five subscales from the Casey-Fink survey, including support, patient safety, stress, communication/leadership, and professional satisfaction. Additionally, program participants who indicated experiencing stress answered supplemental questions regarding

sources of personal stress (Cadmus & Roberts, 2022). After compiling the comprehensive results from the statewide NJCCN nurse residency program, Cadmus and Roberts (2022) compared the results to national benchmarks the Vizient/AACN set.

Data analysis of the survey results indicated significant differences in the NJCCN nurse residency data compared to Vizient/AACN benchmarks (Cadmus & Roberts, 2022). According to Cadmus and Roberts (2022), program initiation subscales for stress and communication/leadership were significantly lower than Vizient/AACN benchmarks, and both subscales yielded a *p-value* of 0.001. Results for the subscale of professional satisfaction were also significantly higher at program initiation, with a *p-value* of 0.003 (Cadmus & Roberts, 2022). During the six-month data collection, the NJCCN nurse residency program showed significantly lower support, patient safety, and professional satisfaction results, yielding *p-values* of 0.002, 0.001, and 0.003, respectively (Cadmus & Roberts, 2022). Cadmus and Roberts (2022) identified no statistically significant results during the twelve-month time period.

The supplemental stress questions also indicated statistically significant differences in the NJCCN program. According to Cadmus and Roberts (2022), NJCCN nurse residents reported significantly higher stress at program initiation and six-month periods, primarily attributed to student loans, with a *p-value* of 0.001. During the twelve-month data collection, stress results were similar between the NJCCN nurse residency program and Vizient/AACN national benchmarks (Cadmus & Roberts, 2022).

The NJCCN nurse residency program also analyzed turnover rates and compared them to national averages. According to Cadmus and Roberts (2022), the NJCCN nurse residency program experienced a 10.4% turnover rate over the study period. This turnover rate is lower than the national new graduate turnover rate of 23.9% (Cadmus & Roberts, 2022). Cadmus and

Roberts (2022) explain that the lower turnover rate saved participating hospitals over nine million dollars over the study period.

Assumptions

Cadmus and Roberts (2022) made various assumptions throughout the article. The most notable assumption was that a statewide, standardized nurse residency program would be more beneficial than unique nurse residency programs at individual facilities. This assumption was not studied, as results from current nurse residency programs within New Jersey were not analyzed. Another assumption Cadmus and Roberts (2022) made is that nurse residency programs decrease turnover rates and save facilities turnover costs. The turnover rate of 10.4% compared to the national average of 23.9% indicate that the assumption made by the article's authors was correct, and increased nurse retention through nurse residency programs can lead to financial savings for hospitals (Cadmus & Roberts, 2022).

Deficit/Conclusion

The article by Cadmus and Roberts (2022) provides rationales that nurse residency programs should be twelve months or longer. Results yielded by Cadmus and Roberts (2022) indicate that nurse residents experienced significantly lower results for support, patient safety, and professional satisfaction when compared to established baselines. Cadmus and Roberts (2022) explain that they expected lower results during the six-month period, as it is typical for new nurse competence and confidence to be lower. The statistically insignificant results at the twelve-month time period point to a need for a more extended nurse residency program, as a longer program may yield improvements at the one-year mark (Cadmus & Roberts, 2022). Implications of continuing with shorter nurse residency programs include lower confidence for new graduate nurses and subsequent decreases in competence and patient satisfaction.

Cadmus and Roberts (2022) also prove that nurse residency programs increase retention rates. Cadmus and Roberts (2022) reported a turnover rate of 10.4% over the study period compared to the national average of 23.9%. This lower turnover rate is associated with significant cost-savings for facilities and provides a financial incentive for hospitals implementing nurse residency programs. Implications of failing to implement nurse residency programs include increased nurse turnover rates and increased costs for institutions.

A 1-Year Accredited Nurse Residency Program's Effect on Intent to Leave

The last article of this literature review is by Failla and Ecoff (2021) and featured in the peer-reviewed *Journal of Nursing Administration*. In the article, Failla and Ecoff (2021) studied the outcomes of a one-year-long nurse residency program in an extensive healthcare system in southern California. The study examined new graduate nurse residents' perception of the nurse residency program, transition to practice, intent to leave, and other metrics using various surveys and scales (Failla & Ecoff, 2021). According to Failla and Ecoff (2021), the study results yielded various noteworthy findings, including a significant decline in organizational commitment from baseline to twenty-four months, a significant increase in conflict with other nurses from baseline to twenty-four months, and a significant increase in intent to leave from baseline to twelve months. This study provides evidence for the continued research into nurse residency programs and the need for continuous quality improvement for ideal outcomes.

Key Points

Failla and Ecoff (2021) examined multiple main points in the article. Failla and Ecoff (2021) explained that the article's purpose was to examine two major vital points – research and evaluate the design and outcomes of a hospital system-wide nurse residency program and determine the effects of the nurse residency program on residents' intent to leave. The study used

a descriptive, comparative research design and collected data at baseline, four-to-five months, twelve months, and twenty-four months (Failla & Ecoff, 2021). According to Failla and Ecoff (2021), the study used several surveys and scales to collect data, including but not limited to the Casey-Fink Graduate Nurses Experience Survey, the Allen and Meyer Affective Commitment Scale, the Eisenberger Social Support Scale, the Intent to Leave Scale, and the Gray-Toft Nursing Stress Scale. The study population included one hundred and seventeen new graduate nurse residents over five hospitals in the Sharp HealthCare system (Failla & Ecoff, 2021). After data collection, the research team calculated mean survey scores and determined statistically significant changes over time (Failla & Ecoff, 2021).

According to Failla and Ecoff (2021), multiple surveys and scales indicated significant changes compared to the baseline. Results from the Allen and Meyer Affective Commitment Scale yielded a significant decrease from baseline to twenty-four months ($p\text{-value} = 0.000$), indicating a declining commitment to the organization among nurse residents (Failla & Ecoff, 2021). According to Failla & Ecoff (2021), the Gray-Toft Nursing Stress Scale experienced statistically significant increases in stress for all included subscales over time, including death and dying ($p\text{-value} = 0.000$), conflict with physicians ($p\text{-value} = 0.000$), lack of support ($p\text{-value} = 0.001$), conflict with other nurses ($p\text{-value} = 0.000$), workload ($p\text{-value} = 0.000$), and uncertainty about treatment or therapies ($p\text{-value} = 0.000$). The findings from the Allen and Meyer Affective Commitment Scale and the Grey-Toft Nursing Stress Scale indicate a trend of declining outcomes as nurse residents continue moving toward independence in nursing practice.

Another primary emphasis of the study was the effect of the nurse residence program on intent to leave. According to Failla and Ecoff (2021), the Intent to Leave Scale included two

questions, one regarding finding another position within the current healthcare organization and one regarding finding another position outside the current healthcare organization. The Intent to Leave Scale results yielded significant differences over time and included a *p-value* of 0.000 (Failla & Ecoff, 2021). According to Failla and Ecoff (2021), the Intent to Leave Scale showed the highest mean score for both questions at twelve months. Results for both questions decreased from twelve to twenty-four months (Failla & Ecoff, 2021). These results presented by Failla and Ecoff (2021) indicate that the twelve-month period is when nurse residents are most likely to leave their current position.

Assumptions

Failla and Ecoff (2021) include various assumptions in the article. The first assumption that the authors made is that nurse residency programs would have a positive impact on new graduate nurse residents' plans to stay in a current position or organization. The study results show the opposite and indicate that nurse residents were most likely to leave their current unit or the organization during the twelve-month period, which coincided with the end of the nurse residency program (Failla & Ecoff, 2021). Another assumption made by the authors is that completing a nurse residency program would improve nurse residents' commitment to their facility or organization. The study results show the opposite and indicate that nurse resident commitment was lowest during the twenty-four-month period (Failla & Ecoff, 2021). Overall, the study's results contradicted the assumptions made by Failla and Ecoff (2021) and showed that the system-wide nurse residency program did not positively impact nurses' intent to leave or commitment to the organization.

Deficit/Conclusion

The article by Failla and Ecoff (2021) indicates that the year-long nurse residency program within Sharp HealthCare did not positively affect new graduate nurses' stress, commitment to the organization, or intent to leave. The study results indicate that leaders and educators within the nurse residency program must re-evaluate the clinical, educational, and personal resources provided to residents and determine possible organizational issues leading to adverse nurse residency program outcomes. This article provides supportive evidence showing that not all nurse residency programs are positive experiences for new graduate registered nurses and that continuous program evaluation and improvement are needed to maintain a successful nurse residency program. Failure to accept the conclusions presented by Failla and Ecoff (2021) may lead to continued adverse outcomes for new graduate nurses and increased organizational turnover for nurse residents.

Conclusion

The articles by Miller et al. (2023), Cadmus and Roberts (2022), and Failla and Ecoff (2021) provided valuable insights and information regarding nurse residency program outcomes. All three articles were different in research approach and provided differing results, but all three articles contributed to the overall body of knowledge for nurse residency programs. Miller et al. (2023) present information supporting the use of nurse residency programs compared to conventional nurse orientation programs. According to Cadmus and Roberts (2022), nurse residency programs positively impact nurse retention, but more research is needed to determine the proper length of nurse residency programs. Not all nurse residency programs are perfect, and Failla and Ecoff (2021) present the need for frequent program evaluation and improvement.

Research regarding nurse residency programs is beneficial not only to new graduate nurses but also to their patients. Improving new graduate nurses' transition into nursing practice through nurse residencies improves nurse knowledge and confidence and can subsequently improve patient care and outcomes.

One of the most significant areas nurse residency programs can impact includes improving nursing practice. The core idea of implementing nurse residency programs across the United States is to provide better training to new graduate nurses and subsequently improve their clinical judgment, communication, and job satisfaction (Munday, 2023). Nursing practice improves when new nurses are better trained and more competent early in their careers.

According to Houser (2023), research is the basis for evidence-based practice. Scientific, peer-reviewed evidence and research determine what evidence-based practices are used in everyday nursing (Houser, 2023). The nurse residency program research included in this review adds to the body of knowledge regarding nurse residency programs and allows researchers and healthcare professionals to determine best practices when creating and implementing nurse residency programs. Additionally, the research into nurse residency programs allows for quality improvement within nurse residency programs and ideally provides better, more evidence-based programming.

Lastly and potentially most importantly, nurse residency programs benefit healthcare. Nurses are integral to any healthcare organization; better-prepared, more competent nurses can uplift all parts of an organization. Well-trained and prepared nurses provide better care and can lead to more satisfied patients. The continued integration and improvement of nurse residency programs across the United States is a step in the right direction for the ever-changing landscape of healthcare delivery in America.

References

- Asber, S. R. (2019). Retention outcomes of new graduate nurse residency programs: An integrative review. *Journal of Nursing Administration, 49*(9), 430-435.
<https://doi.org/10.1097/NNA.0000000000000780>
- Cadmus, E., & Roberts, L. V. (2022). First year outcomes: Program evaluation of a statewide nurse residency program. *Journal of Nursing Administration, 52*(12), 672-678.
<https://doi.org/10.1097/NNA.0000000000001230>
- Failla, K. R., & Ecoff, L. (2021). A 1-year accredited nurse residency program's effect on intent to leave. *Journal of Nursing Administration, 51*(12), 606-613.
<https://doi.org/10.1097/NNA.0000000000001082>
- Houser, J. (2023). *Nursing research: Reading, using, and creating evidence* (5th ed.). Jones & Bartlett Learning.
- Miller, C. M., Meyer, K., Riemann, L. A., Carter, B. T., & Brant, J. M. (2023). Transition into practice: Outcomes of a nurse residency program. *Journal of Continuing Education in Nursing, 54*(1), 32-39. <https://doi.org/10.3928/00220124-20221207-08>
- Munday, R. (2023, January). *What is a nurse residency program?* NurseJournal. Retrieved June 29, 2023, from <https://nursejournal.org/resources/nursing-residency-programs/>